TOWN OF HUNTINGTON **JO-ANN RAIA, TOWN CLERK** 100 Main Street, Room 102

DOG LICENSE APPLICATION

 \square NEW

 \square RENEWAL

MARKINGS	Huntington NY 11743	TELEPHONE	(631) 351-3206 FAX (631) 351	-3205 E-MA	AIL <u>jraia@town.hunting</u>	gton.ny.us	
MAILING ADDRESS (If different): TELEPHONE #:	NAME OF OWNER:						
DOG'S NAME	RESIDENCE ADDRESS:						
DOG BREED: YEAR OF BIRTH:	MAILING ADDRESS (If different): _						
MARKINGS:	TELEPHONE #:		E-M	IAIL ADDRESS:			
RABIES VACCINATION DATE: VETERINARIAN VACCINE MANUFACTURER: SERIAL NO: ONE YEAR THREE YEARS TYPE OF LICENSE	COLOR OF DOG:		MARKINGS:				
VACCINE MANUFACTURER: SERIAL NO: ONE YEAR THREE YEARS TYPE OF LICENSE S.50° OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE Male, neutered 8.50° OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE Male, neutered, 4 mos. & over 18.50° OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE Male, neutered, 4 mos. & over 18.50° OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE Male, neutered, 4 mos. & over 18.50° OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE Male, neutered DATE DATE Male, neutered S.50° OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE							
Male, neutered							
Male, neutered	VACCINE MANUFACTURER:		SERIAL NO:		□ ONE YEAR	☐ THREE YEARS	
Must show proof of age CLERK INITIALS & NUMBER: DATE: * Fee includes a \$1.00 surcharge remitted to New York State ASPCA for Animal Population Control Program *Fee includes a \$3.00 surcharge remitted to New York State ASPCA for Animal Population Control Program *Town of Huntington JO-Ann RAIA, Town CLERK 100 Main Street, Room 102 Huntington NY 11743 TELEPHONE (631) 351-3206 FAX (631) 351-3205 E-MAIL jraia@town.huntington.ny.us NAME OF OWNER: RESIDENCE ADDRESS: MAILING ADDRESS (If different): TELEPHONE #: DOG BREED: YEAR OF BIRTH: COLOR OF DOG: MARKINGS: ID: RABIES VACCINATION DATE: VETERINARIAN VACCINE MANUFACTURER: SERIAL NO: ONE YEAR THREE YEARS TYPE OF LICENSE FEE Male, neutered Male, neutered, 4 mos. & over Male, neutered, 4 mos. & over DATE	Male, neutered Female, spayed Male, unneutered, 4 mos. & over Female, unspayed, 4 mos. & over Exempt Dog: Guide, war, police, detection, therapy, working search, hearing & service		TOTAL PAID: \$ FORM		M OF PAYMENT:		
Fee includes a \$3.00 surcharge remitted to New York State ASPCA for Animal Population Control Program TOWN OF HUNTINGTON JO-ANN RAIA, TOWN CLERK 100 Main Street, Room 102 Huntington NY 11743 TELEPHONE (631) 351-3206 FAX (631) 351-3205 TELEPHONE (631) 351-3205 TELEPHONE (631) 351-3205 TELEPHONE #: DOG BREED: DOG BREED: VEAR OF BIRTH: COLOR OF DOG: MARKINGS: ID: RABIES VACCINATION DATE: VETERINARIAN VACCINE MANUFACTURER: SERIAL NO: ONE YEAR THREE YEARS TYPE OF LICENSE Maic, neutered Maic, neutered Maic, neutered Male, unneutered, 4 mos. & over 18.50 OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE		- 3.00	CLERK INITIALS & NUMBER:		DATE:		
RESIDENCE ADDRESS: MAILING ADDRESS (If different): TELEPHONE #:	TOWN OF HUNTINGTON JO-ANN RAIA, TOWN CLER 100 Main Street, Room 102	K	DOG LICENSE APPLICATION RENEWAL				
MAILING ADDRESS (If different): TELEPHONE #:	NAME OF OWNER:						
TELEPHONE #: E-MAIL ADDRESS:	RESIDENCE ADDRESS:						
DOG'S NAME: DOG BREED: YEAR OF BIRTH: COLOR OF DOG: MARKINGS: ID: RABIES VACCINATION DATE: VETERINARIAN VACCINE MANUFACTURER: SERIAL NO: ONE YEAR	MAILING ADDRESS (If different): _						
COLOR OF DOG:	TELEPHONE #:		E-MAIL ADDRESS:				
RABIES VACCINATION DATE: VETERINARIAN ONE YEAR THREE YEARS VACCINE MANUFACTURER: SERIAL NO: ONE YEAR THREE YEARS TYPE OF LICENSE FEE S.50* Female, spayed 8.50* Male, unneutered, 4 mos. & over 18.50** OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE	DOG'S NAME:		_ DOG BREED:		YEAR OF BIRTH	[:	
VACCINE MANUFACTURER: SERIAL NO: ONE YEAR THREE YEARS TYPE OF LICENSE FEE Male, neutered 8.50* Female, spayed 8.50* Male, unneutered, 4 mos. & over 18.50** OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE	COLOR OF DOG:		MARKINGS:		ID:		
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□ Male, neutered 8.50* □ Female, spayed 8.50* □ Male, unneutered, 4 mos. & over 18.50** OWNER'S SIGNATURE (18 YEARS OF AGE & OVER) DATE	VACCINE MANUFACTURER:		SERIAL NO:		□ ONE YEAR	☐ THREE YEARS	
□ Exempt Dog: Guide, war, police, 0.00* TOTAL PAID: \$ FORM OF PAYMENT: detection, therapy, working search,	☐ Male, neutered ☐ Female, spayed ☐ Male, unneutered, 4 mos. & over ☐ Female, unspayed, 4mos. & over ☐ Exempt Dog: Guide, war, police, detection, therapy, working search,	8.50* 8.50* 18.50** 18.50**	TOTAL PAID: \$	FOR	M OF PAYMENT:		
hearing & service LICENSE #: ISSUED: EXP.: Senior Citizen (60 & older) discount -5.00 Must show proof of age CLERK INITIALS & NUMBER: DATE:	☐ Senior Citizen (60 & older) discount	- 5.00					

^{*} Fee includes a \$1.00 surcharge remitted to New York State ASPCA for Animal Population Control Program **Fee includes a \$3.00 surcharge remitted to New York State ASPCA for Animal Population Control Program

OWNER'S INSTRUCTIONS

- 1. All dogs four (4) months of age or older are to be licensed, as well as any dog under 4 months of age if running at large.
- 2. Print all information, sign and date the form.
- 3. ID and/or Markings please indicate implanted electronic chips or tattoos, missing ears or other significant markings.
- 4. Check the Type of License you are applying for and be sure to include proof of age if applying for the Senior Citizen discount. Submit appropriate payment by check or money order made payable to Jo-Ann Raia, Town Clerk.
- 5. For validation of this license, submit in person or by mail the application, fee, veterinarian's certification of spaying or neutering or proof of exemption, and proof or rabies vaccination to the Huntington Town Clerk's office.
- 6. You should receive your next year's license renewal by mail from the Town Clerk's office 30 days prior to the expiration date of this license. If a renewal is not received, contact Jo-Ann Raia, Town Clerk at (631) 351-3206.

NOTE: For replacement of a lost identification tag, call or visit the Town Clerk's office or website to request a form for a replacement ID Tag. There is a \$3.00 fee for a replacement ID tag.

<u>IMPORTANT</u>: If your address changes within the Town of Huntington or your dog is lost, stolen, transferred to another owner or deceased, please call the Town Clerk's office to report this occurrence.

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